

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>CULAC the PAC of Credit Union National Association</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00007880		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>					
Full Name (Last, First, Middle Initial) of Payee <b>Compass Media Group, Inc.</b>			Date <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>		
Mailing Address 1901 N Clybourn, Suite 300			Amount <span style="border: 1px solid black; padding: 2px;">119050.02</span>		
City Chicago		State IL	Zip Code 60614		Transaction ID : 1023093
Purpose of Expenditure Direct mail production and postage		Category/ Type <span style="border: 1px solid black; padding: 2px;">003</span>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	
Name of Federal Candidate Supported or Opposed by Expenditure: Mr. Daniel B. Maffei			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">203404.02</span>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>		
Mailing Address			Amount <span style="border: 1px solid black; padding: 2px;"></span>		
City		State	Zip Code		
Purpose of Expenditure		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<p>(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;">119050.02</span></p> <p>(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ <span style="border: 1px solid black; padding: 2px;"></span></p> <p>(c) <b>TOTAL</b> Independent Expenditures..... ▶ <span style="border: 1px solid black; padding: 2px;">119050.02</span></p>					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Patricia Sowick</p> <p>Signature _____ [Electronically Filed] Date <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2012</span></p>					